Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name CI					ssification	Population	Owner Type	Primary Source
CT0210012	HOUSATONIC VALLEY REGIONAL H S				NTNC	750	L	GW
Local Address (v	vhere applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
246 WARREN TU	JRNPIKE ROAD (ROUTE 26)	Connections	2					

Towns Served: CANAAN			· ·
Monitoring	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00	600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		10 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/20	6/1-9/30	
	1/1/21 - 12/31/23	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Nickel (1036)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		_
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
		·	·

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Page 1

Schedule Generation Date: 4/11/2019

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name Cla					ssification	Population	Owner Type	Primary Source
CT0210012	HOUSATONIC VALLEY REGIONAL H S				NTNC	750	L	GW
Local Address (where applicable)	Service	Residen	itial	Commercia	al Industri	al Combine	ed Agricultural
246 WARREN T	URNPIKE ROAD (ROUTE 26)	Connections	2					

Towns Served: CANAAN

Monitoring Requirements											
Water System Facility: ENTRY POINT (WSF ID: 00700)											
Organic Chemicals (VOCS)		1 routine	(RT) per three years								
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status								
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete								
	1/1/20 - 12/31/22										

Compliance Schedule Activity Due Date Achieved Date CROSS CONNECTION SURVEY REPORT 3/1/2020

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	Wat	er System Facili	ty and Sampling P	oint In	ventor	У		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPF
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		HVRHS001	KITCHEN BACK SINK	Α	Υ	2	Υ	
		HVRHS002	KITCHEN FRONT SINK	Α	Υ	2	Υ	
		HVRHS003	KITCH/OFC STORAGE	Α	Υ	2	Υ	
		HVRHS004	FITNESS CTR BR	Α	Υ	2	Υ	
		HVRHS005	ATHLETIC DIR OFFICE	Α	Υ	2	Υ	
		HVRHS006	NURSE OFFICE	Α	Υ	2	Υ	
		HVRHS007	NURSE OFFICE BATH	Α	Υ	2	Υ	
		HVRHS008	FACULTY LOUNGE BR	Α	Υ	2	Υ	
		HVRHS010	ROOM 110	Α	Υ	2	Υ	
		HVRHS011	ROOM 111	Α	Υ	2	Υ	
		HVRHS012	ROOM 113	Α	Υ	2	Υ	
		HVRHS013	ROOM 114	Α	Υ	2	Υ	
		HVRHS014	ROOM 115	Α	Υ	2	Υ	
		HVRHS015	LAV NEAR ROOM 116C	Α	Υ	2	Υ	
		HVRHS016	GUIDANCE OFFICE	Α	Υ	2	Υ	
		HVRHS017	CENTRAL OFFICE	Α	Υ	2	Υ	
		HVRHS018	LIBRARY OFFICE	Α	Υ	1	Υ	
		HVRHS019	ROOM 131	Α	Υ	1	Υ	
		HVRHS020	ROOM 130	Α	Υ	1	Υ	
		HVRHS021	ROOM 129	Α	Υ	1	Υ	
		HVRHS022	ROOM 128	Α	Υ	1	Υ	
		HVRHS023	ROOM 127	Α	Υ	1	Υ	
		HVRHS024	ROOM 126	Α	Υ	1	Υ	
		HVRHS025	AG-ED OFC ROOM 355	Α	Υ	1	Υ	
		HVRHS026	ROOM 361	Α	Υ	1	Υ	
		HVRHS027	ROOM 360	Α	Υ	1	Υ	

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

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Water Quality Monitoring and Compliance Schedule											
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Sou	irce		
CT0210012 HOUSATONIC VALLEY REGIONAL H S					NTNC	750	L	GW			
Local Address (Service	Residen	tial	Commerci	al Industri	al Combin	ed Agricultu	ıral			
246 WARREN T	Connections	2									

Connecticut Department of Public Health Drinking Water Section

Towns Served: CANAAN

Contact Role(s): Administrative Contact, Legal Contact

	Water System Facility and Sampling Point Inventory										
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stage WQP 2 DBPR			
		HVRHS028	ROOM 362	Α	Υ	1	Υ				
		HVRHS029	WORK ROOM 1	Α	Υ	1	Υ				
		HVRHS030	WORK ROOM 2	Α	Υ	1	Υ				
		HVRHS031	TANK/BOOSTER SYS	Α							
		UPSTREAM	WITHIN 5 SERVICE CON	Α							
00700	ENTRY POINT	3	ENTRY POINT	Α							
10132	WELL 1	2	WELL	Α							
53920	WELL 6	2		Α							
53922	BLADDER TANK 1										
53924	BLADDER TANK 2										
53926	ATMOSPHERIC STORAGE TANK	·									
53928	WELL X TROL BLADDER TANKS										

53928 WELL X	TROL BLADDEF	RTANKS							
			Certifi	ed Operat	or Information	1			
Water System Fac	cility: DISTR	IBUTION S'	YSTEM (W	SF ID: 00600)					
Facility Classification	on: SMALL WA	ATER SYSTEM	1						Certification
Operator Name			Operator	Туре	Certification(s)				Expiration
LEMAY, REALE D. CHIEF OPERA				RATOR	WATER TREATMEN	IT PLANT	OPERATOR -	- CLASS III	12/31/2019
					DISTRIBUTION SYSTEM OPERATOR - CLASS I				6/30/2020
KILBOURN, ERIC			ASSIGNED	OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I				12/31/2019
					WATER TREATMENT PLANT OPERATOR - CLASS II				12/31/2019
			(Contact Inf	ormation				
Name				Organization	ı			Job Title	
Regional High Scho	ol Dist. #1								
Mailing Address Lin	e One		Mailing Ad	dress Line Two			City	State	Zip Code
Business Phone	Extension	Fax	Ŋ	Mobile Phone	Emergency Phone	Email A	ddress		
Company Delegals									
Contact Role(s): O	wner			0				1.1.701	
Name				Organization				Job Title	
Dr. Pamela Vogel				Regional Sch	ool District 1		Superinten	dent	
Mailing Address Lin	e One		Mailing Ad	Mailing Address Line Two City State			Zip Code		
246 Warren Turnpi	ke Rd					Falls Vill	age	СТ	06031
Business Phone	Extension	Fax	ľ	Mobile Phone	Emergency Phone	Email A	ddress		
860-824-0855		860-824-	1271		515-238-4108 pvogel@region1schools.org				

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

Water quarry Fromtoring and compliance seriodate											
PWS ID	WS ID PWS Name					Owner Type	Primary Source				
CT0210012	T0210012 HOUSATONIC VALLEY REGIONAL H S					L	GW				
Local Address (v	where applicable)	Service	Resider	ntial Commerc	ial Industr	ial Combin	ed Agricultural				
246 WARREN T	URNPIKE ROAD (ROUTE 26)	Connections	2								

Towns Served: CANAAN

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule										
PWS ID PWS Name				Cla	ssification	Population	Owner Type	Prir	mary Source		
CT0210013	EDWARD R. HAMILTON BOOKSELLER				NTNC	150	Р		GW		
Local Address (v	Service	Residen	ntial	Commerci	al Industri	al Combine	ed	Agricultural			
1/17 SOLITH ROL	ITF 7	2									

1 rout Collection Period 5 routine Collection Period 6/1-9/30 6/1-9/30	c (RT) per nine years Compliance Status Complete Compliance Status Complete Complete Complete Complete Complete Compliance Status Compliance Status Compliance Status Compliance Status Compliance Status Complete Complete Complete
1 rout Collection Period 5 routine Collection Period 6/1-9/30 6/1-9/30 1 rout	Compliance Status Complete ine (RT) per quarter Compliance Status Complete Complete (RT) per three years Compliance Status ine (RT) per quarter Compliance Status Complete
1 rout Collection Period 5 routine Collection Period 6/1-9/30 6/1-9/30 1 rout	Compliance Status Complete ine (RT) per quarter Compliance Status Complete Complete (RT) per three years Compliance Status ine (RT) per quarter Compliance Status Complete
1 rout Collection Period 5 routine Collection Period 6/1-9/30 6/1-9/30 1 rout	Complete ine (RT) per quarter Compliance Status Complete Complete (RT) per three years Compliance Status ine (RT) per quarter Compliance Status Complete
5 routine Collection Period 6/1-9/30 6/1-9/30 1 rout	ine (RT) per quarter Compliance Status Complete Complete (RT) per three years Compliance Status ine (RT) per quarter Compliance Status Compliance Status
5 routine Collection Period 6/1-9/30 6/1-9/30 1 rout	Compliance Status Complete Complete (RT) per three years Compliance Status ine (RT) per quarter Compliance Status Compliance Status
5 routine Collection Period 6/1-9/30 6/1-9/30 1 rout	Compliance Status Complete Complete (RT) per three years Compliance Status ine (RT) per quarter Compliance Status Compliance Status
5 routine Collection Period 6/1-9/30 6/1-9/30 1 rout	Complete Complete (RT) per three years Compliance Status ine (RT) per quarter Compliance Status Complete
6/1-9/30 6/1-9/30 1 rout	(RT) per three years Compliance Status ine (RT) per quarter Compliance Status Complete
6/1-9/30 6/1-9/30 1 rout	(RT) per three years Compliance Status ine (RT) per quarter Compliance Status Complete
6/1-9/30 6/1-9/30 1 rout	compliance Status ine (RT) per quarter Compliance Status Complete
6/1-9/30 6/1-9/30 1 rout	compliance Status ine (RT) per quarter Compliance Status Complete
6/1-9/30 6/1-9/30 1 rout	compliance Status ine (RT) per quarter Compliance Status Complete
6/1-9/30 6/1-9/30 1 rout	ine (RT) per quarter Compliance Status Complete
6/1-9/30 1 rout	Compliance Status Complete
1 rout	Compliance Status Complete
	Compliance Status Complete
Collection Period	Complete
	Complete
1 routine	(RT) per three years
Collection Period	Compliance Status
1 re	outine (RT) per year
Collection Period	Compliance Status
	Complete
	Complete
1 routine	(RT) per three years
Collection Period	Compliance Status
1 routine	(RT) per three years
Collection Period	Compliance Status
	1 r Collection Period 1 routine Collection Period

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

CT0210013	EDWARD R. HAMILTON BOOKSELLER	NTNC	150	Р	GW					
PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source					
Water Quality Monitoring and Compliance Schedule										
	Connecticut Department of Public Health Drinking Water Section									

Connections

Service

CD Lite II - Itl. Detail to Marco C

Residential Commercial

2

Industrial

Combined

Agricultural

Towns Served: CANAAN

147 SOUTH ROUTE 7

Local Address (where applicable)

Manitarina Danvinancata									
Monitoring Requirements									
Water System Facility: ENTRY POINT - HAMILTON WELL (WSF ID: 00701)									
Inorganic Chemicals (IOCS) 1 routine (RT) per three year									
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status						
EP - HAMILTON WELL (3)	1/1/17 - 12/31/19								
	1/1/20 - 12/31/22								
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year						
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status						
EP - HAMILTON WELL (3)	1/1/18 - 12/31/18		Complete						
	1/1/19 - 12/31/19		Complete						
	1/1/20 - 12/31/20								
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years						
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status						
EP - HAMILTON WELL (3)	1/1/17 - 12/31/19								
	1/1/20 - 12/31/22								
Organic Chemicals (VOCS)		1 r	outine (RT) per year						
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status						
EP - HAMILTON WELL (3)	1/1/18 - 12/31/18		Complete						
	1/1/19 - 12/31/19		Complete						
	1/1/20 - 12/31/20								
Other Co	mpliance Schedules								

Compliance Schedule Activity Due Date Achieved Date CROSS CONNECTION EXEMPTION 3/1/2024

Water System Facility and Sampling Point Inventory										
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos V	Stage VQP 2 DBPI		
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	А	Υ		Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α						
		EDRH001	UPPER KITCHEN SINK	Α	Υ	N	Υ			
		EDRH002	LOWER KITCHEN SINK	Α		2	Υ			
		EDRH003	UPPER LADIES ROOM	Α	Υ	N	Υ			
		EDRH004	UPPER MENS ROOM	Α	Υ	N	Υ			
		EDRH005	LOWER BATHROOM	Α	Υ	2	Υ			
		EDRH006	LOWER LADIES ROOM	Α	Υ	N	Υ			
		EDRH007	LOWER MENS ROOM	Α	Υ	N	Υ			
		EDRH008	SHIPPING SINK	Α	Υ	N	Υ			
		EDRH009	WORK SINK LOWER	Α	Υ	2	Υ			
		EDRH010	UPPER UTILITY SINK	Α	Υ	N	Υ			
		UPSTREAM	WITHIN 5 SERVICE CON	Α						
00700	ENTRY POINT - BUSINESS WELL	3	EP - BUSINESS WELL	Α						

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Connecticut Department of Public Health Drinking Water Section	
Water Quality Monitoring and Compliance Schedule	

PWS ID PWS Name C					ssification	Population	Owner Type	Primary Source
CT0210013	CT0210013 EDWARD R. HAMILTON BOOKSELLER					150	Р	GW
Local Address (where applicable)		Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural
147 SOUTH ROUTE 7		Connections	2					

Towns Served: CANAAN

	Water System Facility and Sampling Point Inventory										
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR		
00701	ENTRY POINT - HAMILTON WELL	3	EP - HAMILTON WELL	Α							
10133	BUSINESS WELL	2	WELL #2	Α							
10134	HAMILTON WELL	2	WELL #1	Α							
52815	HAMILTON PRESSURE STORAGE										
52817	BUSINESS PRESSURE STORAGE										

Certified	Operator	Information
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Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL W	/ATER SYSTEM		Certification
Operator Name	Operator Type	Certification(s)	Expiration
LEMAY, REALE D.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS III	12/31/2019
		DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2020
KILBOURN, ERIC	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2019
		WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2019

Contact Information										
Name				Organization			Job Title			
Mr. Richard Hamilton				Edward R. H	Edward R. Hamilton Bookseller					
Mailing Address Lin	ailing Address Line One Mailing Addr			lress Line Two			City	State	Zip Code	
PO Box 3358						Falls Vill	age	СТ	06031	
Business Phone	Extension	Fax	N	lobile Phone	Emergency Phone	Email Address				
860-824-0204		860-824-0	340			richardh	richardh@ehbmail.com			

Contact Role(s): Administrative Contact, Legal Contact, Owner

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name C				Cla	ssification	Population	Owner Type	Primary Source
CT0210014 CAMP ISABELLA FREEDMAN					NTNC	84	Р	GW
Local Address (where applicable)		Service	Residen	itial	Commercia	al Industri	al Combine	ed Agricultural
116 JOHNSON ROAD		Connections	3				19	

Towns Served: CANAAN			
Monitorin	ng Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00	0600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 re	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)			(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)			outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)			(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)			outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		

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Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name C			Cla	ssification	Population	Owner Type	Primary Source	
CT0210014	CAMP ISABELLA FREEDMAN				NTNC	84	Р	GW
Local Address (where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
116 JOHNSON	ROAD	Connections	3				19	

Towns Served: CANAAN

CROSS CONNECTION SURVEY REPORT

Other Compliance Schedules						
Compliance Schedule Activity	Due Date	Achieved Date				

3/1/2020

Water System Facility and Sampling Point Inventory									
Water System Facility IL	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos		stage DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		MAIN K/S	GENERATED BY BATCH	Α	Υ				
		MAY B/S	GENERATED BY BATCH	Α	Υ				
		OFFICE B/S	GENERATED BY BATCH	Α	Υ				
		SCHEURER B/	GENERATED BY BATCH	Α	Υ				
		SUBURBS B/S	GENERATED BY BATCH	Α	Υ				
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
20451	WELL	2	WELL	Α					

Certified Operator Information

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL V	VATER SYSTEM		Certification
Operator Name	Operator Type	Certification(s)	Expiration
HELMING, TRAVIS	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	9/30/2019
		WATER TREATMENT PLANT OPERATOR - CLASS III	9/30/2019

				Contact Inf	ormation				
Name Organization								Job Title	
Mr. Michael J. Davi	no			Isabella Freedman/Hazon Facilties Director					
Mailing Address Lin	e One		Mailing	ailing Address Line Two			City	State	Zip Code
116 Johnson Rd						Falls Village CT		06031	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	e Email Address			
860-824-5991	106				508-221-7972	mike.davino@hazon.org			

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

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Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0210023	TOWN OF CANAAN				NTNC	63	L	GW
Local Address (v	vhere applicable)	Service	Residen	itial	Commercia	al Industri	al Combine	ed Agricultural
35 PAGE ROAD		Connections	1					

Towns Served: CANAAN			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	600)		
Asbestos (1094)	1 routine	(RT) per nine years	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0210023	TOWN OF CANAAN				NTNC	63	L	GW
Local Address (w	here applicable)	Service	Residen	tial	Commercia	al Industri	al Combine	ed Agricultural
35 PAGE ROAD		Connections	1					

Towns Served: CANAAN

Monitoring Requirements									
Water System Facility: ENTRY POINT (WSF ID: 00700)									
Organic Chemicals (VOCS)	1 rc	outine (RT) per year							
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status						
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete						
	1/1/19 - 12/31/19		Complete						

1/1/20 - 12/31/20

Other Compliance Schedules									
Compliance Schedule Activity	Due Date	Achieved Date							
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012								
CROSS CONNECTION EXEMPTION	3/1/2014								
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2014								
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2015								
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2016								
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2017								
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2018								

Water System Facility and Sampling Point Inventory									
Water System	Water System Facility	Sampling Point	Sampling Point		Total Coliform	Lead and Copper		Si	tage
Facility ID)	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP 2	DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		INFANT/TODD	GENERATED BY BATCH	Α	Υ				
		PRESCHOOL 3	GENERATED BY BATCH	Α	Υ				
		PRESCHOOL B	GENERATED BY BATCH	Α	Υ				
		PRESCHOOL S	GENERATED BY BATCH	Α	Υ				
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
11028	WELL	2	WELL	Α					
53942	BLADDER TANK								

Certified Operator Information

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL WATER SYSTEM

Operator Name

Operator Type

Certification(s)

Expiration

OPERATOR ASSIGNMENT REQUIRED

OPERATOR ASSIGNI	IVIENT REQUIR	ED								
Contact Information										
Name				Organization	า		Job Title			
Canaan										
Mailing Address Line One Mailing Addr				ng Address Line Two		City	State	Zip Code		
Pusinoss Phono	Evtoncion	Fa	· ·	Mobile Dhone	Emergency Dhone	Email Address	·			

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Connecticut Department of Public Health Drinking Water Section														
Water Quality Monitoring and Compliance Schedule														
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Local Address (where applicable) Service Resid								ntial Co	mmerci	al Industri	al Combine	ed Agricultural		
35 PAGE ROAD						Connectio	ns 1							
Towns Served: CANAAN														
Business i non	LACCIONI TON					e i none	Emergency Phone En		Linairi	1001 000				
Contact Role(s):	Owner													
Name Organization									Job Title					
Mr. Henry Todd Town of Canaan							an		First Selectman					
Mailing Address Line One Mailing Address						ss Line Two			City		State	Zip Code		
P.O. Box 47 108 Main Street					t			Falls Village		СТ	06031			
Business Phon	e Extension Fax Mol		Mobile	e Phone	Emergeno	Emergency Phone		Email Address						
860-824-0707	07 860-824-4506								Selectr	Selectmen@Canaanfallsvillage.org				
Contact Role(s):	Administra	tive Co	ontact. Leg	al Cont	act				•					

Please note the following:

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